

RECEIPT

DATE

3/18/26

No.

232505

RECEIVED FROM

TRG Trucking LLC

\$

350.00

Three hundred fifty and $\frac{00}{100}$

DOLLARS

 FOR RENT FOR

DE-SW-2017

ACCOUNT	
PAYMENT	
BAL. DUE	

 CASH CHECK MONEY
ORDER CREDIT
CARD

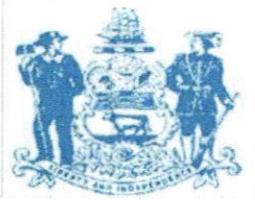
FROM

0712109

TO

BY

M.M.



STATE OF DELAWARE
DEPARTMENT OF NATURAL RESOURCES
AND ENVIRONMENTAL CONTROL
DIVISION OF WASTE AND HAZARDOUS SUBSTANCES
COMPLIANCE AND PERMITTING SECTION

89 KINGS HIGHWAY
DOVER, DELAWARE 19901

TELEPHONE: (302) 739-9403
FAX: (302) 739-5060

SOLID WASTE TRANSPORTER PERMIT APPLICATION

Language Preference:

Instructions: You must complete this application in its entirety and attach all applicable documentation. (Note: For applicants renewing an existing permit, this application requires the submission of updated information and documentation. References to material submitted under previous applications are no longer accepted.)

The application must be signed by the company owner or a corporate officer. A check or money order payable to the "State of Delaware" must accompany this application and be sent to:

Delaware Department of Natural Resources and Environmental Control
Compliance and Permitting Section
89 Kings Highway
Dover, DE 19901

1. Type of Permit

- New – **SCRAP TIRES ONLY** Submit a check or money order, payable to the "State of Delaware," in the amount of \$75.00.
- New – **ALL OTHERS** Submit a check or money order, payable to the "State of Delaware" in the amount of \$350.00.
- Renewal: Permit # DE-SW- 2017 Expiration Date _____

Please indicate the term for which you desire your permit to be issued. Submit a check or money order, payable to the "State of Delaware," for the indicated permit fee.

SCRAP TIRES ONLY

- One Year - \$75.00
- Two Years - \$125.00
- Three Years - \$175.00
- Four Years - \$225.00
- Five Years - \$275.00

ALL OTHERS

- One Year - \$350.00
- Two Years - \$650.00
- Three Years - \$950.00
- Four Years - \$1250.00
- Five Years - \$1550.00

2. Release to Public

Do you wish to be included on the list of transporters that is provided to persons requesting a list of Delaware permitted solid waste transporters? Yes No

3. Company Information

Company Name TRC Trucking LLC

Location Address:	Mailing Address:
<u>25793 Whoville Lane</u>	<u>25793 Whoville Lane</u>
<u>Milton DE 19968</u>	<u>Milton DE 19968</u>

Contact: Nicholas Bradford Title: owner

Business Phone: 302 853 0987 Fax: _____

E-mail: TRCTRUCKING21@gmail.com

24 hr Emergency Contact Phone: 302 853 0987

4. Company Ownership Information

(a). Please indicate the company type:

- Proprietorship
- Partnership
- Corporation - If company is a corporation, indicate city, state, and date of incorporation.

City: _____ State: _____ Date: _____

- Municipality
- Public institution
- Limited Liability Corporation (LLC) State: DE
- Other: (must specify) _____

(b). For each Owner, Partner, or Corporate Officer, attach a list with name, title, mailing address, date of birth, and % ownership. Include all stockholders owning greater than 5% outstanding shares.

Attachment #1

(c). If company is owned by or affiliated with a parent company, attach parent company name, address & mailing address, and % ownership.

Attachment _____

No parent company

5. Company locations in Delaware

List name and street address of each company location, including freight terminals, within the State of Delaware.

- Attachment # 2
 No Delaware locations

6. Company Affiliates

List name, location and mailing addresses, nature of business relationship of all company Affiliates, which affiliates are engaged in the business of waste transport, treatment, storage, disposal, recovery or reclamation. (Affiliated companies are defined as those companies owned by the same owners, corporate officers, or parent company.)

- Attachment _____
 No affiliates

7. Type of Waste to be Transported

(a). Check all that apply. Refer to Delaware's *Regulations Governing Solid Waste* for definitions of waste categories.

- Residential waste
 Commercial waste (from **non-manufacturing, non-processing** businesses and offices)
 Industrial waste (from a manufacturing or industrial process)
 Dry waste: construction/demolition debris
 trees/stumps
 other (must specify) _____
 Ash: municipal incinerator
 coal ash
 other (must specify) _____
 Infectious waste
 Non-hazardous petroleum-hydrocarbon contaminated soils
 Asbestos-containing waste
 Scrap Tires

(b). Does your company collect and transport residential (household) waste from single family homes, condominiums and apartment complexes in Delaware? Yes No

(c). If you answered "YES" to question 7.b., above, does your company provide recycling services to those customers? Yes No N/A

(d). If you offer recycling services, does your company collect and transport the recyclables separately from the waste generated by your customers? Yes No

(e). If you offer recycling services, are the recyclables ultimately taken to an incinerator (waste-to-energy) or landfill? Yes No

- (d). Certificate of Insurance must be attached and include minimum automobile liability coverage as follows:

	FOR-HIRE INTERSTATE	ALL OTHERS
Residential Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Commercial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Industrial Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Dry Waste	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Ash	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Infectious Waste	\$1,000,000.00 + MCS-90 <input type="checkbox"/>	\$750,000.00 + MCS-90 <input type="checkbox"/>
Non-Hazardous Petroleum Contaminated Soils	\$750,000.00 + MCS-90 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>
Asbestos	\$1,000,000.00 + MCS-90 <input type="checkbox"/> (For Hire & Private)	\$350,000.00 <input type="checkbox"/>
Scrap Tires Only	\$350,000.00 <input type="checkbox"/>	\$350,000.00 <input type="checkbox"/>

11. Spill Control and Safety

List all spill control and safety equipment which will be carried on each vehicle. (**Note:** Separate lists by type of vehicle and type of waste may be required.) Attach a copy of the Spill Control Plan. The Spill Control Plan **must** contain the following elements: (1) List of safety and spill control equipment carried in the vehicle, (2) Driver preventive measures, (3) Driver immediate corrective actions, (4) Company internal communications, (5) Company external communications including the **Delaware Emergency Reporting Numbers: 1-800-662-8802 and 302-739-9401**, and (6) Cleanup and decontamination measures.

Spill Control Plan: Attachment #4

12. Driver Training

IN SUMMARY OR OUTLINE FORM, describe the procedures that your company takes to ensure that all company drivers are safe and competent drivers. Small owner-operators may describe their years of experience and driving record in lieu of a formal program.

- (a). Include requirements for special licenses (e.g. CDL, including any special endorsements), any special training received, including dates training was received (e.g. asbestos training), and any ongoing company programs. (e.g. weekly safety meetings or annual refresher courses);
- (b). Include your company procedure for periodic checks of the driver's records for moving violations, and your company policy on progressive counseling/discipline based on points;
- (c). Describe how drivers are instructed in the following:
 - (i) Knowledge of proper handling procedures for the type of solid waste being transported.
 - (ii) Familiarity with the approved accidental discharge containment plan. (Spill Control Plan)
 - (iii) Familiarity with the conditions of the solid waste transporter's permit.

Driver Training, attachment #5

13. Vehicle Identification

On the form provided with this application, list **MAKE, MODEL, YEAR, SERIAL NUMBER, LICENSE PLATE NUMBER, STATE OF REGISTRATION, MANUFACTURER'S GVWR and OWNERSHIP** of all vehicles used for the transportation of solid waste. You must list both motorized and container units. (If you maintain a list of company vehicles in a computer database you may submit a print out of the vehicles provided it contains the information requested herein.)

NOTE: You must notify CAPS in writing of any changes to information contained within this application, such as additions or deletions of vehicles, in accordance with conditions of the issued permit.

Vehicle List Attached

14. Vehicle Operator Information

Is a list of all vehicle operators attached? Yes

What tax form do you submit to the IRS for your vehicle operators?

- Form W-2
- Form 1099-Misc
- Other

15. Environmental Record

List all criminal citations, arrests, convictions, civil or administrative violations, and civil or administrative enforcement actions, and the disposition(s) thereof for the violation or alleged violation of any environmental statute, regulation, permit, license, approval, or order, regardless of the state in which it occurred. Indicate whether it was a local, state, or federal violation or alleged violation. List all such items for the applicant, and if the applicant is other than an individual, for any employee while employed by the applicant, or any partner, officer, or director of the applicant as an individual or for any former business of such partner, officer, or director. For civil or administrative violations or alleged violations, list all such items for the last five (5) years from the date of the application. Information submitted under this section is subject to verification. **Failure to submit complete and accurate information may lead to permit denial or revocation.**

- Attachment _____
- No violations within the specified time period

16. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, upon personal knowledge and information, the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information.

**Signature Nicholas Bradford Date 3/16/26
Print Name Nicholas Bradford Title owner

****A legal owner or corporate officer must sign the application****

SPILL CONTROL PLAN FOR SOLID WASTE HAULERS

- (1) Spill control and safety equipment carried in each vehicle:
 - 1). Reflectors and/or flares
 - 2). Fire extinguisher
 - 3). First aid kit
 - 4). Heavy-duty gloves, hard hat
 - 5). Flashlight
 - 6).
- (2) All loads will be enclosed, covered, or tarped to prevent accidental discharge of the waste during transport to the disposal facility.
- (3) The driver will perform the following pre-trip inspections:
 - 1).
 - 2).
- (4) If there is an accident or other emergency which causes a portion of the load to be spilled, the driver, if uninjured, will contact the following designated company coordinator:
Name: _____ Phone: _____
- (5) The designated coordinator will contact the state and municipal authorities where the accident occurred. If the accident or spill has the potential to cause environmental damage, (either due to the nature of the waste, location of the accident, or additional factors such as leaking oil, gasoline, or hydraulic fluid) the person contacted will notify the state emergency response team, by calling one of the following numbers:
Delaware: 911, (302) 739-9401 or 1-800-662-8802 (*Other numbers may be listed as follows, however, the listed Delaware numbers **must** be included in the spill control plan.*)
Maryland:
New Jersey:
- (6) The designated coordinator will contract for clean-up services with another company. (*This is optional, however, if another company is to be contracted, please append a list of cleanup companies by either region or state.*)
- (7) This plan will be carried in all vehicles, along with the permit.

Attachment #1

Nicholas Bradford
25793 Whoville Ln
Milton, DE 19968

100% Ownership
DOB 03/20/1992
Owner

Attachment #2

TRG Trucking LLC
25793 Whoville Ln
Milton, DE 19968

Attachment #3

DSWA-

Jones Crossroads
28560 Landfill Lane
Georgetown, DE 19947

Cherry Island
1706 E. 12th Street
Wilmington, DE 19943

Sandtown
1107 Willow Grove Road
Felton, DE 19943

Covanta Delaware Valley
10 Highland Ave
Chester, PA 19013

Covanta Fairfax
9898 Furnace Rd
Lorton, VA 22079

Attachment #4

Transporter Spill Control Plan For Waste

TRG TRUCKING LLC



State of Delaware
Department of Natural Resources & Environmental Control
Division of Air & Waste Management
89 Kings Highway
Dover, Delaware 19901

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INTRODUCTION

Part 11 of the Solid Waste Transporter Application requires a Spill Control Plan. TRG TRUCKING, LLC is dedicated to the safety of our employees and the environment. Our Spill Control Plan provides the spill control and safety equipment which will be carried on our transport vehicles, the measures our drivers will take in the event of a spill of infectious waste, immediate corrective actions, our internal communications, our external communications and clean-up and decontamination measures.

IMPLEMENTATION OF THE SPILL CONTROL PLAN

The provisions of the Spill Control Plan shall be implemented whenever a spill of waste arises which could potentially endanger public health and the safety of the environment.

REVISIONS TO THE SPILL CONTROL PLAN

The Spill Control Plan will be periodically reviewed and updated when necessary. At a minimum this will occur when:

1. Applicable regulations are revised;
2. The plan fails in the event of a spill;
3. The mode of operation changes in a manner that materially increases the potential for releases of infectious waste, or changes the response necessary in the event of a spill;
4. The list of spill coordinators changes;
5. The list of spill equipment changes; or
6. As required by the Department.

PURPOSE OF THE SPILL CONTROL PLAN

The purpose of a Spill Control Plan is two-fold. First, it is a document that is carried in the transport vehicle to provide information and direction to the driver during a spill. Second, it is accepted by the Delaware Department of Natural Resources & Environmental Control as the transporter's written assurance that certain activities will be conducted in an acceptable manner.

LIST OF SAFETY AND SPILL CONTROL EQUIPMENT

1. Shovel;
2. Broom and dust pan or scooper;
3. Heavy-duty latex exam gloves or disposable Nitrile gloves;
4. Two pairs of heavy rubber gloves;
5. Safety glasses;
6. Rubber boots or other protective foot covering;
7. One gallon with sprayer of EPA registered disinfectant;
8. One container of anti-bacterial skin cleanser (alcohol-based hand sanitizer product);
9. Flashlight and batteries;
10. Absorbent HazMat socks (3 of 3" diameter x 3' L);
11. Absorbent HazMat pads (15 of 15"W x 20"L Heavy Duty);
12. One roll of caution tape;
13. Scissors;
14. Tongs or forceps to pick up broken or sharp items;
15. First aid kit;
16. Markers, labels, and pens;
17. Tyvek suits (x 2);
18. 10 pounds of absorbent (kitty-litter or equivalent);
19. Respiratory mask;
20. One warning triangle kit;

One ABC-rated fire extinguisher (carried in the truck cab);

DRIVER PREVENTATIVE MEASURES

1. Driver will conduct a complete pre-trip inspection of the vehicle daily.
2. Driver will check the spill kit to assure the spill kit is fully stocked and on the vehicle.
3. Driver will check each container before loading to make sure it is properly packaged and there is no sign of leakage on the container.
4. The driver will load and maintain the containers in an upright position in a box truck and will secure the containers with a load bar or other device to maintain their integrity.
5. The driver will check all the containers on the truck at each stop to assure no containers are leaking.

DRIVER IMMEDIATE CORRECTIVE MEASURES

1. Infectious Waste Spill:

A. Personnel (Drivers)

- (1) If a person has direct contact with untreated Infectious Waste, first remove any contaminated clothing and clean the contaminated area thoroughly.
- (2) Prior to conducting the following clean-up procedures, utilize the following personal protective equipment (PPE):
 - a) Tyvek suit (for liquid spills only);
 - b) Tyvek booties (for liquid spills only);
 - c) Impermeable gloves in conjunction with disposable surgical gloves; and
 - d) Safety glasses.

B. Surfaces Coming in Contact with the Spill:

- (1) The driver that becomes aware of the spill must:
 - a) Contain the spill using absorbent material and/or absorbent pads or dikes from the Spill Kit:
 - b) Cordon off the spill area using safety cones and caution tape from the Spill Kit: and
 - c) Inform the appropriate Supervisor, via telephone or other communication device, as soon as possible.
- (2) The driver(s) cleaning up the spill must wear PPE as specified above.
- (3) Place an appropriate red plastic bag, meeting ASTM D 1709-91, inside a fiberboard box at the Packing Group II level.

- (4) Initially, shovel the solid portion of the spilled material into the previously prepared fiberboard box or reusable container.
- (5) Spray the contaminated area with an EPA registered disinfectant.
- (6) Spread absorbent on the contaminated area and wait at least 5 minutes.
- (7) Shovel the absorbent and any other contaminated items into the container; continue until no visible contamination remains.
- (8) Once again spray the area previously covered by the spill with the EPA registered disinfectant.
- (9) Spray any tools that may have come into contact with the infectious waste during this clean-up.
- (10) Remove and place all disposable PPE in the fiberboard box or reusable plastic container used during this clean-up. Seal the contents and mark the box or container as "Spill Cleanup."
- (11) Ensure that the inner packaging (bag) and the outer packaging (container) are closed according to the applicable packaging specifications. Mark the container "Spill Cleanup."
- (12) Segregate the "Spill Cleanup" container from any other loaded waste, to avoid mixing the contents with manifested waste contents.
- (13) Load all containers onto the transportation vehicle and ensure it is properly secured.
- (14) Generate a Tracking Document for any additions or subtractions to total quantity of waste caused by the spill response activity (i.e., Infectious Waste from one container cleaned up and placed into two new containers).
- (15) The Supervisor will need to complete and file the incident-reporting requirements where required.

COMPANY INTERNAL COMMUNICATIONS

1. In the event of a spill, the driver will contact:
 - a. Nicholas Bradford- 302-853-0987

COMPANY EXTERNAL COMMUNICATIONS

In the event of an emergency of an infectious waste spill during transportation, the transporter will immediately notify the appropriate state agency with the following information:

1. Name of the person reporting the incident.
2. Name, address, EPA identification number, and the license number of the transporter.
3. Phone number where the person reporting the incident can be reached.
4. Date, time, and location of the incident.
5. Mode of transportation and type of transport vehicle.
6. A brief description of the incident, including the type of incident.
7. For each waste involved in the spill:
 - a. The name and if applicable, an EPA identification number of the generator of the waste.
 - b. Shipping name and waste code of waste.
 - c. Estimated quantity of the material or the waste spilled.
 - d. The extent of the contamination of land, water or air.

In the event of an emergency involving an infectious waste spill during transportation, the transporter will immediately notify the affected municipality of the occurrence and nature of the spill.

LIST OF EMERGENCY RESPONSE AGENCIES

DELAWARE

Delaware - DNREC

302-739-9401 or 1-800-662-8802

Delaware Local Police and Fire Departments

911 or O (Operator)

MARYLAND

Maryland - Department of the Environment

410-537-3000 or 866-633-4686

Maryland Local Police and Fire Departments

911 or O (Operator)

PENNSYLVANIA

Pennsylvania Department of Environmental Protection

717-787-4343 (24 hours a day)

Pennsylvania Emergency Management Agency

IN PA 800-424-7362 (24 hours a day)

OUTSIDE PA - 717-651-2001

Pennsylvania Local Police and Fire Departments

911 or O (Operator)

Attachment #5

A.) N/A

B.) My insurance carrier checks my license at a minimum of once a year with my policy renewal and if any other circumstances require additional checks.

C.) (i) I have been hauling solid waste and recycling for over 19 months. I received extensive training with Voyager and Independent transfer operators during

D.) this time.

(ii) I have reviewed the spill containment plan with my insurance carrier on an annual basis.

(iii) I have reviewed the DNREC website in reference to the DESW permit

Davis, DaQuan (DNREC)

From: nicholas bradford <trgtrucking21@gmail.com>
Sent: Tuesday, March 17, 2026 1:20 PM
To: WHStranporters
Subject: Re: Follow up
Attachments: image001.png; image002.png; image003.png; image004.png; image005.png; image006.png; image007.png; image008.png; MCs-90_260317_131436.pdf

Section 9 (b) Yes I have a PA waste haulers permit. See copy attached

Section 10 - attached below

Section 10 - attached below

Section 14 - Yes I am the only driver currently.

On Tue, Mar 17, 2026, 10:54 AM WHStransporters <WHStransporters@delaware.gov> wrote:

Hello,

Thank you for submitting your application for your Delaware solid waste transporter permit. Upon review, I have found that some information is missing or needs to be updated. Please address the items listed below:

- **Section 9(b)**- Do you have a waste hauler license from the state of PA?
- **Section 10**- Provide an updated Certificate of Insurance and add the Department of Natural Resources and Environmental Control address in the Certificate Holder section the address is [89 Kings HWY, Dover, DE 19901](#).
- **Section 10**- Please provide an MCS-90 endorsement form with your auto insurance policy number on it.
- **Section 14**-Are you the only driver?

Please provide the information requested above via e-mail within five (5) days.

Thank you,

DaQuan Davis



DaQuan L. Davis

Environmental Scientist

Division of Waste and Hazardous Substances

 302-739-9403

 WHStranporters@delaware.gov

 89 Kings Hwy SW, Dover, DE 19901

 dnrec.delaware.gov



From: nicholas bradford <trgtrucking21@gmail.com>

Sent: Monday, March 16, 2026 4:13 PM

To: Davis, DaQuan (DNREC) <daquan.davis@delaware.gov>

Subject: Follow up

Good afternoon,

Following up from our conversation earlier today to see what items I need to correct and resend to you.

Thank you

USDOT Number: _____ Date Received: _____

Please note, the expiration date as stated on this form relates to the process for renewing the Information Collection Request for this form with the Office of Management and Budget. This requirement to collect information as requested on this form does not expire. For questions, please contact the Office of Registration, Registration Division.

A Federal Agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0008. Public reporting for this collection of information is estimated to be approximately 2 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, Washington, D.C. 20590.



Endorsement for Motor Carrier Policies of Insurance for Public Liability under Sections 29 and 30 of the Motor Carrier Act of 1980

FORM MCS-90

Issued to TRG Trucking LLC of Milton, DE (Motor Carrier name) (Motor Carrier state or province)

Dated at Carlisle, PA on this 1 day of December, 2025

Amending Policy Number: PAP DUOA 56819 Effective Date: 01-01-2026

Name of Insurance Company: DAILY UNDERWRITERS OF AMERICA

Countersigned by: [Signature] (authorized company representative)

The policy to which this endorsement is attached provides primary or excess insurance, as indicated for the limits shown (check only one):

- [X] This insurance is primary and the company shall not be liable for amounts in excess of \$ 1,000,000 for each accident.
[] This insurance is excess and the company shall not be liable for amounts in excess of \$ _____ for each accident in excess of the underlying limit of \$ _____ for each accident.

Whenever required by the Federal Motor Carrier Safety Administration (FMCSA), the company agrees to furnish the FMCSA a duplicate of said policy and all its endorsements. The company also agrees, upon telephone request by an authorized representative of the FMCSA, to verify that the policy is in force as of a particular date. The telephone number to call is: 717 243-5757

Cancellation of this endorsement may be effected by the company or the insured by giving (1) thirty-five (35) days notice in writing to the other party (said 35 days notice to commence from the date the notice is mailed, proof of mailing shall be sufficient proof of notice), and (2) if the insured is subject to the FMCSA's registration requirements under 49 U.S.C. 13901, by providing thirty (30) days notice to the FMCSA (said 30 days notice to commence from the date the notice is received by the FMCSA at its office in Washington, DC).

Filings must be transmitted online via the Internet at https://portal.fmcsa.dot.gov/UrsRegistrationWizard/.

(continued on next page)

DEFINITIONS AS USED IN THIS ENDORSEMENT

Accident includes continuous or repeated exposure to conditions or which results in bodily injury, property damage, or environmental damage which the insured neither expected nor intended.

Motor Vehicle means a land vehicle, machine, truck, tractor, trailer, or semitrailer propelled or drawn by mechanical power and used on a highway for transporting property, or any combination thereof.

Bodily Injury means injury to the body, sickness, or disease to any person, including death resulting from any of these.

Property Damage means damage to or loss of use of tangible property.

Environmental Restoration means restitution for the loss, damage, or destruction of natural resources arising out of the accidental discharge, dispersal, release or escape into or upon the land, atmosphere, watercourse, or body of water, of any commodity transported by a motor carrier. This shall include the cost of removal and the cost of necessary measures taken to minimize or mitigate damage to human health, the natural environment, fish, shellfish, and wildlife.

Public Liability means liability for bodily injury, property damage, and environmental restoration.

The insurance policy to which this endorsement is attached provides automobile liability insurance and is amended to assure compliance by the insured, within the limits stated herein, as a motor carrier of property, with Sections 29 and 30 of the Motor Carrier Act of 1980 and the rules and regulations of the Federal Motor Carrier Safety Administration (FMCSA).

In consideration of the premium stated in the policy to which this endorsement is attached, the insurer (the company) agrees to pay, within the limits of liability described herein, any final judgment recovered against the insured for public liability resulting from negligence in the operation, maintenance or use of motor vehicles subject to the financial responsibility requirements of Sections 29 and 30 of the Motor Carrier Act of 1980 regardless of whether or not each motor vehicle is specifically described in the policy and whether or not such negligence occurs on any route or in any territory authorized to be served by the insured or elsewhere. Such insurance as is afforded, for public liability, does not apply to injury to or death of the insured's employees while engaged in the course of their employment, or property transported by the insured, designated as cargo. It is understood and agreed that no condition, provision, stipulation, or limitation contained in the policy, this endorsement, or any other endorsement thereon,

or violation thereof, shall relieve the company from liability or from the payment of any final judgment, within the limits of liability herein described, irrespective of the financial condition, insolvency or bankruptcy of the insured. However, all terms, conditions, and limitations in the policy to which the endorsement is attached shall remain in full force and effect as binding between the insured and the company. The insured agrees to reimburse the company for any payment made by the company on account of any accident, claim, or suit involving a breach of the terms of the policy, and for any payment that the company would not have been obligated to make under the provisions of the policy except for the agreement contained in this endorsement.

It is further understood and agreed that, upon failure of the company to pay any final judgment recovered against the insured as provided herein, the judgment creditor may maintain an action in any court of competent jurisdiction against the company to compel such payment.

The limits of the company's liability for the amounts prescribed in this endorsement apply separately to each accident and any payment under the policy because of anyone accident shall not operate to reduce the liability of the company for the payment of final judgments resulting from any other accident.

(continued on next page)

